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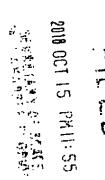
(Re	equestor's Name)			
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M. MILLIGA...
OCT 2 0 2018

COVER LETTER

Division of Cor	porations		
SUBJECT: MARTA	BEACH LLC		
30 0 00001.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		JAIME REYES	
		Name of Person	
	CBA N	MAMI LLC	
		Firm/Company	
	7855 NW 12TH STF	REET SUITE 214	
		Address	
	DORAL FL 33126		
		City/State and Zip Code	
	cbamiamillc@gmail.c	com to be used for future annual report notifi	ication
For further information of	concerning this matter, please ca	·	cutton,
To future mioritation e	oncerning this matter, prease ea	111.	
	Reyes	at (<u>786</u>) 728 5603	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marta BeachLLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/19/2016 and assigned.

Florida document number L16000193350

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new

Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gisselle Denice Martinez	5757 Collins Ave, Apt 701	∑ Add
		Miami Beach, FL 33140	Remove
			☐ Change
			☐ Remove
			□ Change
			Add
			Remove
			Change
			□ Remove
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		Remove	☐ Remove
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Effective date, if	other than the	date of filing			(optio	nal)	
(If an effective date is Note: If the date is	listed, the date must	t be specific and c	annot be prior to	date of filing or mo	re than 90 days after f	filing.) Pursuant to	605.0207 (3) listed as the
document's effecti	ve date on the De	partment of Sta	ate's records.	, ,	•		
	fies a delaved	l effective da	ate, but not :	an effective ti	me, at 12:01 a	.m. on the ea	arlier of:
the record speci	after the reco	ord is filed.	,		,		
the record speci) The 90th day							0.7
) The 90th day	280/18	0				نوه شغ	=
the record speci) The 90th day Dated <u>OR</u>	28/18	A.		. •		£) 188
) The 90th day	28 18	Signature of a m	ember or authori	zed representative	of a member	2 (19)	2010 OCT 15 PM II

Page 3 of 3

Filing Fee: \$25.00